



*Missouri Department of Social Services
Division of Aging*

MISSOURI CARE OPTIONS

**Annual Report
Fiscal Year 1997
and
A Five Year Summary
Fiscal Year 1993 - Fiscal Year 1997**

*Research and Evaluation Unit
January 1998*

Division of Aging

MISSOURI CARE OPTIONS

Annual Report

Fiscal Year 1997

and

A Five Year Summary

Fiscal Year 1993 - Fiscal Year 1997

Missouri Department of Social Services

221 West High Street

P.O. Box 1527

Jefferson City, Missouri 65102-1527

Department of Social Services Mission Statement

To maintain or improve the quality of life for the people of the state of Missouri by providing the best possible services to the public, with respect, responsiveness and accountability, which will enable individuals and families to better fulfill their potential.

Division of Aging Mission Statement

To promote, maintain, improve and protect the quality of life and quality of care for Missouri's older adults and persons with disabilities so they may live as independently as possible with dignity and respect.

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Introduction

Missouri Care Options (MCO) was implemented five years ago by the Department of Social Services/Division of Aging. The program works to:

- ◆ inform individuals of available long-term care options;
- ◆ promote quality home/community-based long-term care;
- ◆ moderate the growth of state funded nursing facility placements by assessing the viability of state funded home and community-based care; and
- ◆ enhance the integrity, independence and safety of Missouri's older adults.

The Central Registry Unit (toll-free hotline 1-800-392-0210), operated by the Division of Aging, is the clearinghouse for receipt of screening referrals. Upon completion of the screening process, an individual is determined to be MCO eligible if the individual:

- ◆ is considering state funded long-term care;
- ◆ has low-level maintenance health care needs but is "medically eligible" for nursing facility care;
- ◆ could reasonably have care needs met outside a nursing facility; and
- ◆ receives Medicaid funded long-term care in a home/community-based setting.

The purpose of this report is to present a fiscal year 1997 summary as well as a five year summary of the MCO referral and screening process and the associated costs of providing long-term care to MCO clients.

New Initiatives in Fiscal Year 1997

Three new components of the Missouri Care Options program developed in fiscal year 1997 included:

- ◆ **Advanced Respite and LPN Respite** services were added as an advanced care home/community-based option. Provided by qualified staff of provider agencies, respite services provide temporary relief to live-in caregivers of persons with special health care needs who require close supervision and/or nursing care. Funding is provided through Social Service Block Grant/General Revenue (SSBG/GR). Planning is underway to add these services to the Medicaid Home and Community-Based Services Waiver, subject to approval by the U.S. Health Care Financing Administration.

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- ◆ **Clinical Consultation**, also funded through SSBG/GR, is aimed at elderly persons with mental health needs that go unrecognized, and thereby, unmet. These unmet needs not only reduce quality of life but often result in premature and unnecessary nursing facility placement. Elderly persons targeted by this project generally have chronic physical health conditions in addition to mental health conditions, such as depression, anxiety disorders, panic disorders and late onset alcoholism or other forms of substance abuse. Persons suffering from these problems respond very successfully to short-term interventions.

The initial pilot project includes persons living in the catchment area served by the Swope Parkway Health Center in Kansas City. Persons will be determined appropriate for the project through a mental health screening administered by Division of Aging MCO field staff. Persons referred to Swope Parkway Health Center will receive a more comprehensive assessment and any necessary treatment. Mental health professionals will determine the nature and scope of treatment, and will coordinate with the Division of Aging to ensure continuity of care and integration of services.

A variety of funding streams will be used, including Medicare, Medicare HMO, Medicaid, insurance and services purchased by the Department of Mental Health and the Division of Aging. Planning for this pilot began in fiscal year 1997 and implementation began in November, 1997. Ongoing evaluation of the program may lead to replication in other parts of the state.

- ◆ The **Community Outreach Initiative** involves placing MCO staff persons in settings such as hospitals, clinics, Area Agency on Aging offices and other community settings. The major goal is to integrate services and service access at the earliest possible opportunity for persons needing state funded long-term care. These MCO workers may take Medicaid applications and determine eligibility.

Beginning in March, 1997, experienced Division of Aging staff were placed in hospitals. Thirty-eight hospitals and community settings are currently working with the Division of Aging for staff placement. In fiscal year 1997, 442 patients were served by Community Outreach Initiative staff. Of these, 75 or 17 percent chose or required nursing facility placement; 125 or 28 percent chose home care; and the remainder were discharged to their own homes without the need for services. Close monitoring of the program will continue in fiscal year 1998.

Nursing Facility Cost Avoidance

Over the five years of the MCO program, it is estimated that almost \$266 million in nursing facility costs were avoided by increased participation as a result of efforts to offer alternatives to facility-based long-term care. The state share of this cost avoidance is 35 percent (\$94 million) with the remaining 65 percent (\$172 million) representing the federal share. Nursing facility cost avoidance is estimated by subtracting the actual service costs for MCO home/community-based clients from the costs of a Medicaid nursing facility* for the same number of days.

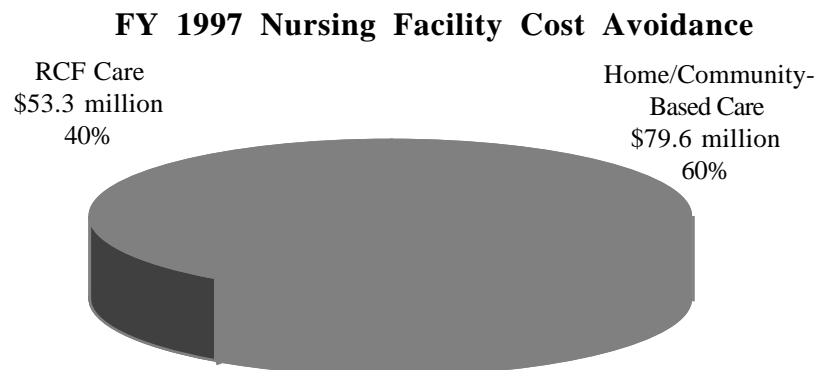
Nursing Facility Cost Avoidance				
	<u>General Revenue</u>	<u>Federal</u>	<u>Total</u>	<u>Adjusted Total**</u>
FY 1993	\$2,084,938	\$3,140,844	\$5,225,782	\$5,225,782
FY 1994	\$5,424,267	\$9,583,170	\$15,007,437	\$15,007,437
FY 1995	\$15,354,103	\$28,971,341	\$44,325,444	\$39,507,325
FY 1996	\$24,180,799	\$44,185,251	\$68,366,050	\$62,353,087
FY 1997	\$46,745,702	\$86,136,640	\$132,882,342	\$117,132,933
Total	\$93,789,809	\$172,017,246	\$265,807,055	\$239,226,564

* FY 1993, 1994 Medicaid per diem rate: \$16.00 GR, \$24.00 Federal
 FY 1995, 1996 Medicaid per diem rate: \$18.72 GR, \$26.96 Federal
 FY 1997 Medicaid per diem rate: \$23.60 GR, \$35.41 Federal

** Total for fiscal years 1995, 1996 and 1997 has been adjusted for the Federal Reimbursement Allowance. In 1994 the Missouri legislature enacted the "nursing facility reimbursement allowance" program, which imposed an annual fee on all privately owned nursing facilities. The purpose of this fee was to generate additional revenue to provide for increased Medicaid reimbursement to nursing homes. (Reference RSMo 198.401-198.439.)

Note: In previous fiscal year reports, nursing facility cost avoidance figures were not adjusted for Supplemental Nursing Care cash grants received by residential care facility (RCF) personal care recipients. The amounts shown above have been adjusted for these cash grants.

In fiscal year 1997, the majority of the total nursing facility cost avoidance (\$132.9 million) resulted from providing home/community-based care. The remaining 40 percent was attributed to MCO clients receiving care in a residential care facility (RCF).



Costs of Providing Services to Home/Community-Based and RCF MCO Clients

Since the inception of MCO, for those persons screened through this program over \$95 million has been spent providing in-home services and personal care services to persons residing in the community and to RCF residents. Of that total, the state share was 55 percent and the federal share, 45 percent. The number of persons served has increased from less than 1,000 in fiscal year 1993 to over 12,000 in fiscal year 1997.

Costs of Providing Home/Community-Based and RCF Services			
	<u>General Revenue</u>	<u>Federal</u>	<u>Total</u>
FY 1993	\$450,638	\$673,510	\$1,124,148
FY 1994	\$2,521,788	\$2,304,203	\$4,825,991
FY 1995	\$10,083,159	\$7,589,053	\$17,672,212
FY 1996	\$15,751,760	\$13,254,624	\$29,006,384
FY 1997	\$23,422,619	\$19,048,363	\$42,470,982
Total	\$52,229,964	\$42,869,753	\$95,099,717

Note: In previous fiscal year reports, cost figures did not include Supplemental Nursing Care cash grants received by RCF-personal care recipients. The amounts shown in the table above and graph below include these cash grants.

For fiscal year 1997, total costs amounted to \$42.5 million. Over half of that total paid for home/community-based services. The remainder was Medicaid costs related to services provided to recipients residing in an RCF and their cash grants received monthly from the state.

FY 1997 MCO Costs



Costs by Service and Funding Source

The 12,154 MCO home/community-based clients who received a service reimbursed during the fiscal year received almost 3 million units* of services, averaging 247 units per recipient. Almost half of recipients received Title XIX (Medicaid) personal care services in their homes; 38 percent received personal care while residing in an RCF. Over one-third also received homemaker services.

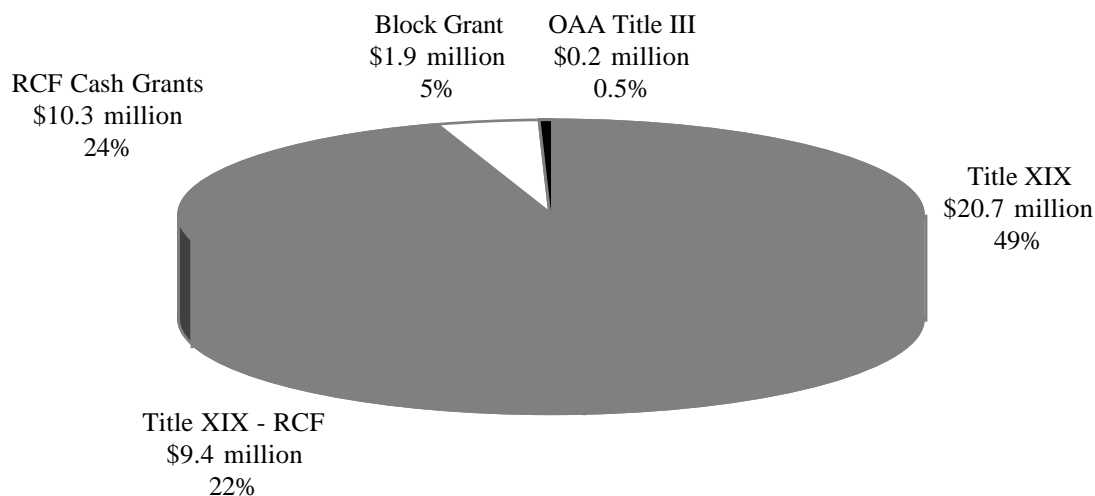
Home/Community-Based Services Reimbursed During Fiscal Year 1997			
<u>Services</u>	<u>Recipients</u>	<u>Delivered Units*</u>	<u>Total Costs</u>
Title XIX Personal Care	5,837	948,659	\$10,486,374
Title XIX RCF-Personal Care	4,596	913,260	\$9,365,845
Title XIX Homemaker	4,366	485,539	\$5,366,487
Title XIX RN Visits	1,166	17,373	\$574,262
Title XIX Hourly Respite	955	248,202	\$2,220,760
Title XIX Home Health	599	38,488	\$785,277
Title XIX Advanced Personal Care	443	61,141	\$917,444
Title XIX Adult Day Care	118	8,500	\$324,947
Title XIX Respite	14	284	\$11,280
Block Grant Personal Care	1,028	91,697	\$1,006,682
Block Grant Homemaker	846	50,290	\$551,769
Block Grant RN Visits	183	1,350	\$44,835
Block Grant Hourly Respite	178	24,449	\$218,478
Block Grant Advanced Personal Care	93	5,905	\$88,636
OAA Title III-C/Home Delivered Meals**	529	78,200	\$188,462
OAA Title III-B, Title III-D**	32	3,735	\$28,610
RCF Cash Grants	5,019	NA	\$10,290,834
TOTAL (unduplicated)	12,154	2,997,072	\$42,470,982

* 1 unit=1 hour; 1 RN unit=1 visit; 1 adult day care unit=1 day; 1 home delivered meal unit=1 meal

** Older Americans Act (OAA) Title III services tracking is based on data entry by Division of Aging staff.

Title XIX (Medicaid) funded almost half of the home/community-based MCO services during fiscal year 1997. Title XIX also funded personal care services in an RCF, accounting for 22 percent of total costs. RCF cash grants accounted for 24 percent and block grant funds for five percent of service costs. Older Americans Act Title III funds used was \$217,072. (See graph at the top of page 6.)

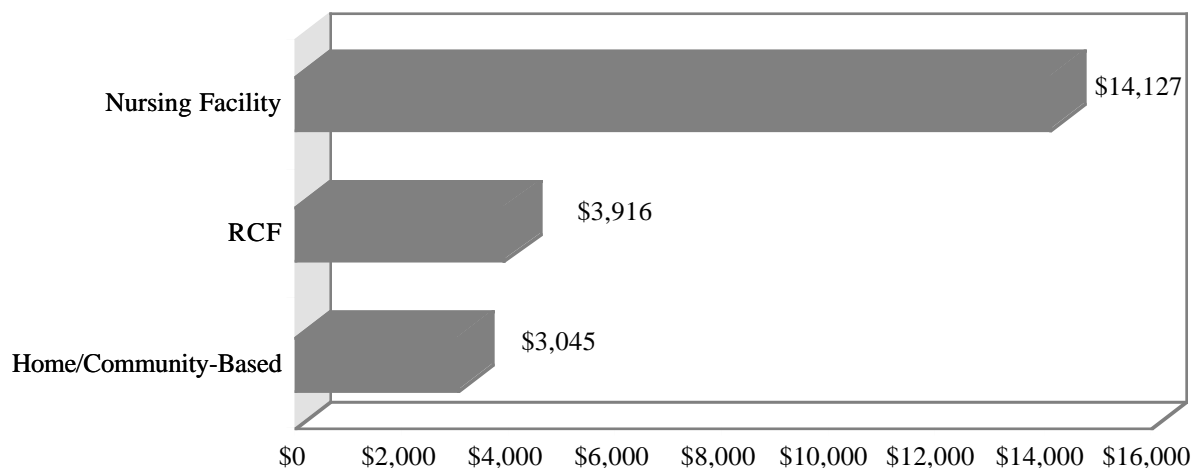
FY 1997 Home/Community-Based MCO Costs by Funding Source



Average Annual Cost Per MCO Recipient

The average annual cost during fiscal year 1997 to provide home/community-based services to each MCO client “medically eligible” for nursing facility level of care was estimated at \$3,045. For those who received personal care and cash grants in an RCF, the estimated annual cost per recipient was \$3,916. For a nursing facility resident, the average annual cost was estimated at \$14,127. Average annual costs were determined by dividing total costs by total recipients, whether the person received care for one day or the entire year. This differs from the computation used in fiscal year 1996, which was based on annualization of average monthly costs only.

Average Annual Cost Per Recipient FY 1997



Note: The nursing facility estimate includes costs for some residents who did not have an MCO screening; it also has been adjusted to exclude the Federal Reimbursement Allowance. The RCF cost includes cash grants, unlike the FY 1996 computation.

Referrals, Screenings and Outcomes

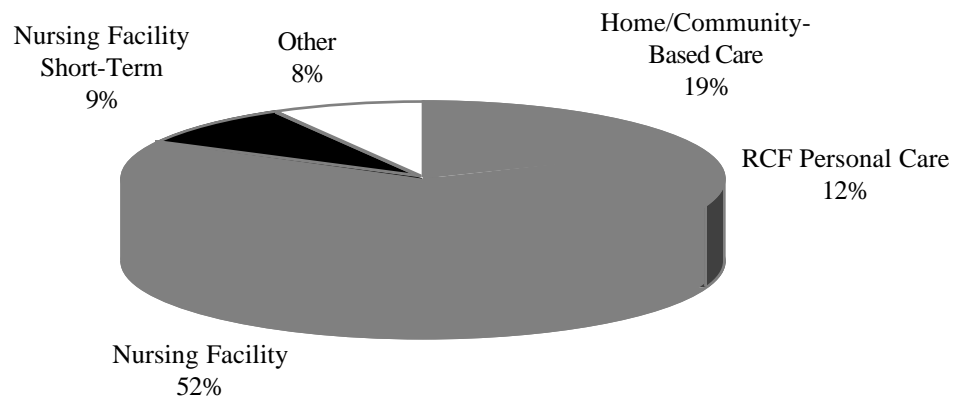
Over the past five years, almost 90,000 referrals have been received at the Central Registry Unit (CRU). Screenings are required for persons entering nursing facilities who are Medicaid eligible or potentially Medicaid eligible. The CRU completed the screenings for over 21,000 referrals because of an immediate need for nursing facility care. Division of Aging social workers screened the remaining referrals. (For screening outcomes see Appendix, pages 16-19.)

MCO Referrals			
	<u>Received at the CRU</u>	<u>Screened by the CRU</u>	<u>Screened by DA Field Staff</u>
FY 1993	13,532	4,083	9,449
FY 1994	16,340	4,353	11,987
FY 1995	18,063	4,791	13,272
FY 1996	19,603	4,359	15,244
FY 1997	21,753	3,650	18,103
Total	89,291	21,236	68,055

Notes: The number of referrals does not necessarily correlate to the number of persons since a person can be referred more than once during a fiscal year. The decline in the number of referrals screened by the CRU from FY 1996 to FY 1997 is a result of a policy change regarding post admission screening.

During fiscal year 1997, almost half of the persons referred for screening chose or required nursing facility care; another nine percent entered a nursing facility on a short-term basis. Almost one-third of those referred chose home/community-based care or personal care in an RCF. Eight percent did not receive MCO services.

FY 1997 Referral Outcomes



Medicaid Long-Term Care

Division of Aging Clients in the Long-Term Alternative Care System (LTACS)

In the past five years, over 40,000 Division of Aging clients received Medicaid funded home/community-based services at a total cost of \$294 million in their homes. Over 10,000 additional clients received services in an RCF, costing \$54.5 million. Over \$2.3 billion was expended for nursing facility care of 74,083 residents. Not all Division of Aging clients were screened through the MCO program. Therefore, the numbers reflect MCO and non-MCO clients.

Medicaid Long-Term Care			
	Home/Community Services	RCF Services	Nursing Facility Care*
<i>Medicaid Costs</i>			
FY 1993	\$32,962,544	\$0	\$412,599,313
FY 1994	\$45,207,588	\$4,332,385	\$426,960,521
FY 1995	\$56,648,907	\$15,326,336	\$451,743,624
FY 1996	\$71,048,390	\$16,620,122	\$495,964,653
FY 1997	\$88,274,529	\$18,242,992	\$515,569,300
Total	\$294,141,958	\$54,521,835	\$2,302,837,411
<i>Medicaid Recipients</i>			
FY 1993	13,847	0	35,795
FY 1994	17,003	3,763	36,601
FY 1995	19,913	6,226	36,705
FY 1996	22,900	6,790	36,747
FY 1997	25,020	7,289	36,496
Total (unduplicated**)	40,186	10,152	74,083

* Adjusted to exclude the Federal Reimbursement Allowance.

** Medicaid recipients may have received a paid service in more than one fiscal year. The total represents the number of recipients, unduplicated over the five years. Thus, if they received a service in more than one year, they are counted in each year but only counted once in the total.

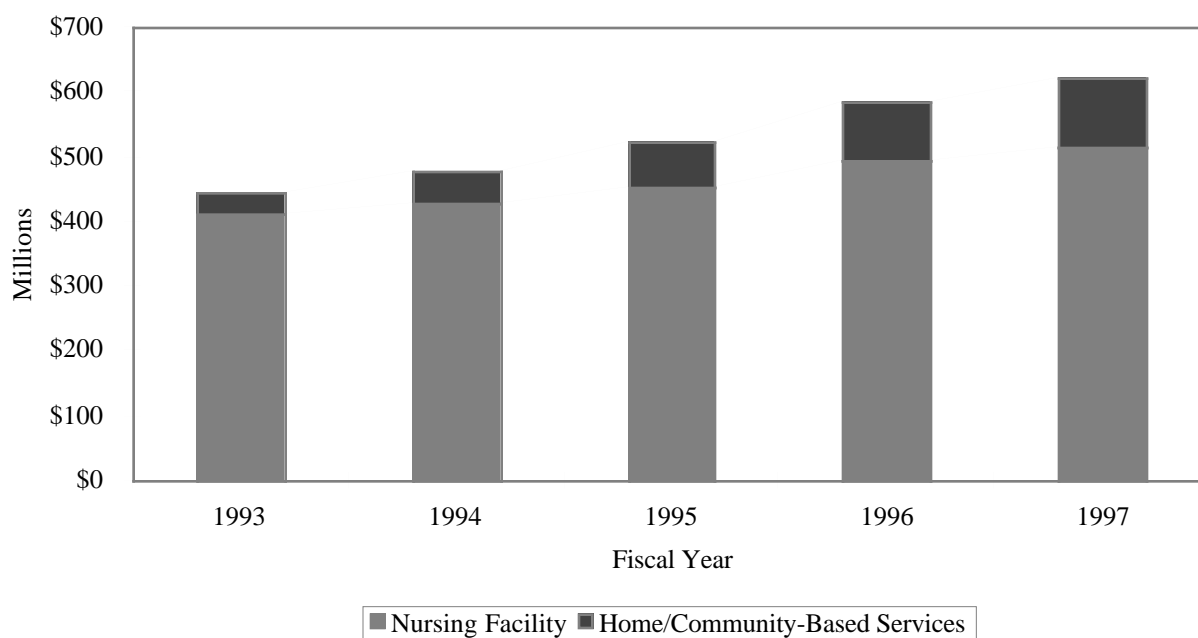
Medicaid long-term care costs increased seven percent from fiscal year 1996 to 1997 for Division of Aging clients. Of the \$622 million total, 17 percent was for home/community-based care and the remaining 83 percent for nursing facility care. Since fiscal year 1993, the home/community-based care portion of Medicaid long-term care dollars for Division of Aging clients has increased ten percent. While the number of nursing home residents increased only two percent from fiscal year 1993 to 1997, the number of clients receiving home/community-based care jumped 81 percent.

Medicaid Long-Term Care Costs					
	Home/Community- Based Services Costs*	% of Total	Nursing Facility Costs**	% of Total	Total Costs
FY 1993	\$32,962,544	7%	\$412,599,313	93%	\$445,561,857
FY 1994	\$49,539,973	10%	\$426,960,521	90%	\$476,500,494
FY 1995	\$71,975,243	14%	\$451,743,624	86%	\$523,718,867
FY 1996	\$87,668,512	15%	\$495,964,653	85%	\$583,633,165
FY 1997	\$106,517,521	17%	\$515,569,300	83%	\$622,086,821

* Includes RCF Medicaid costs but not general revenue cash grants.

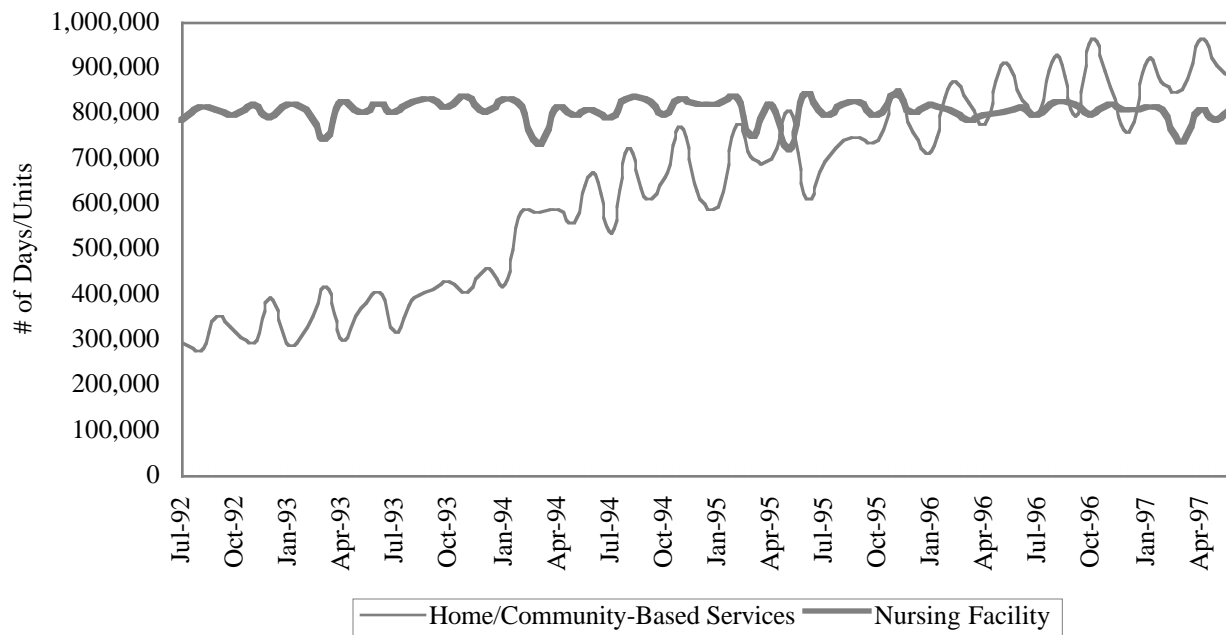
** Adjusted for the Federal Reimbursement Allowance for fiscal years 1995, 1996 and 1997.

Medicaid Long-Term Care Costs for Division of Aging Clients

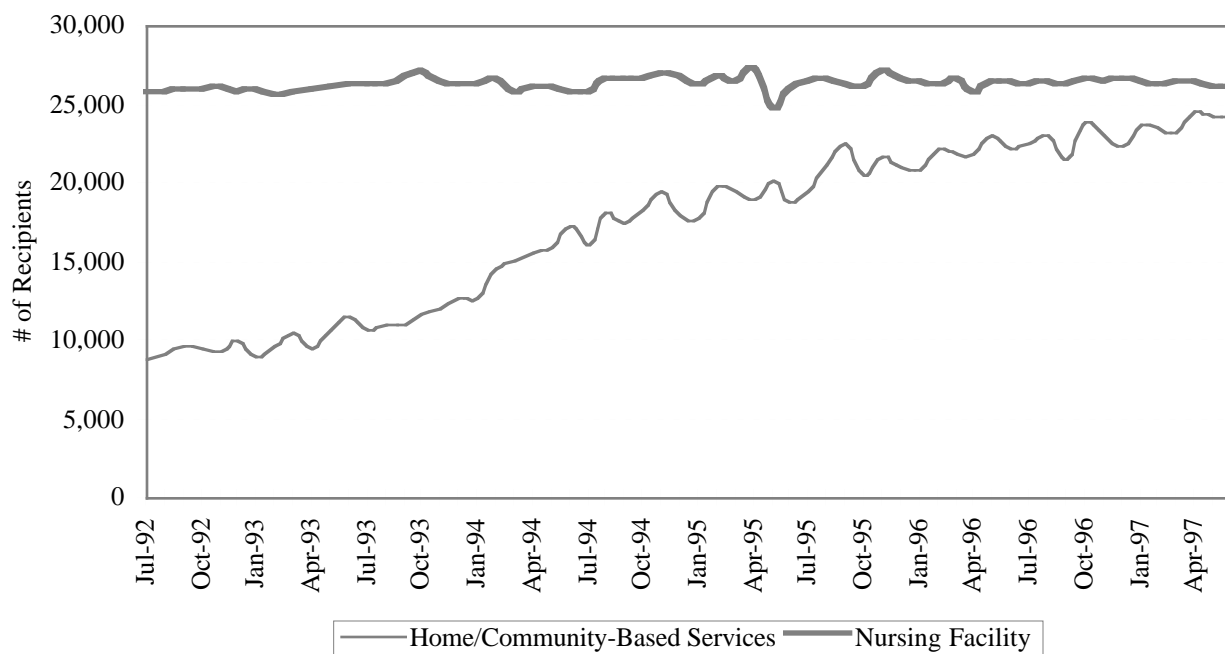


The number of Medicaid nursing facility reimbursed days and the number of Medicaid nursing facility residents has remained steady over the past five years. In contrast, for home/community-based services, the number of Medicaid reimbursed units and number of recipients have more than doubled since fiscal year 1993.

**Medicaid Reimbursed Days/Units by Month
FY 1993 - FY 1997**



**Medicaid Recipients by Month
FY 1993 - FY 1997**

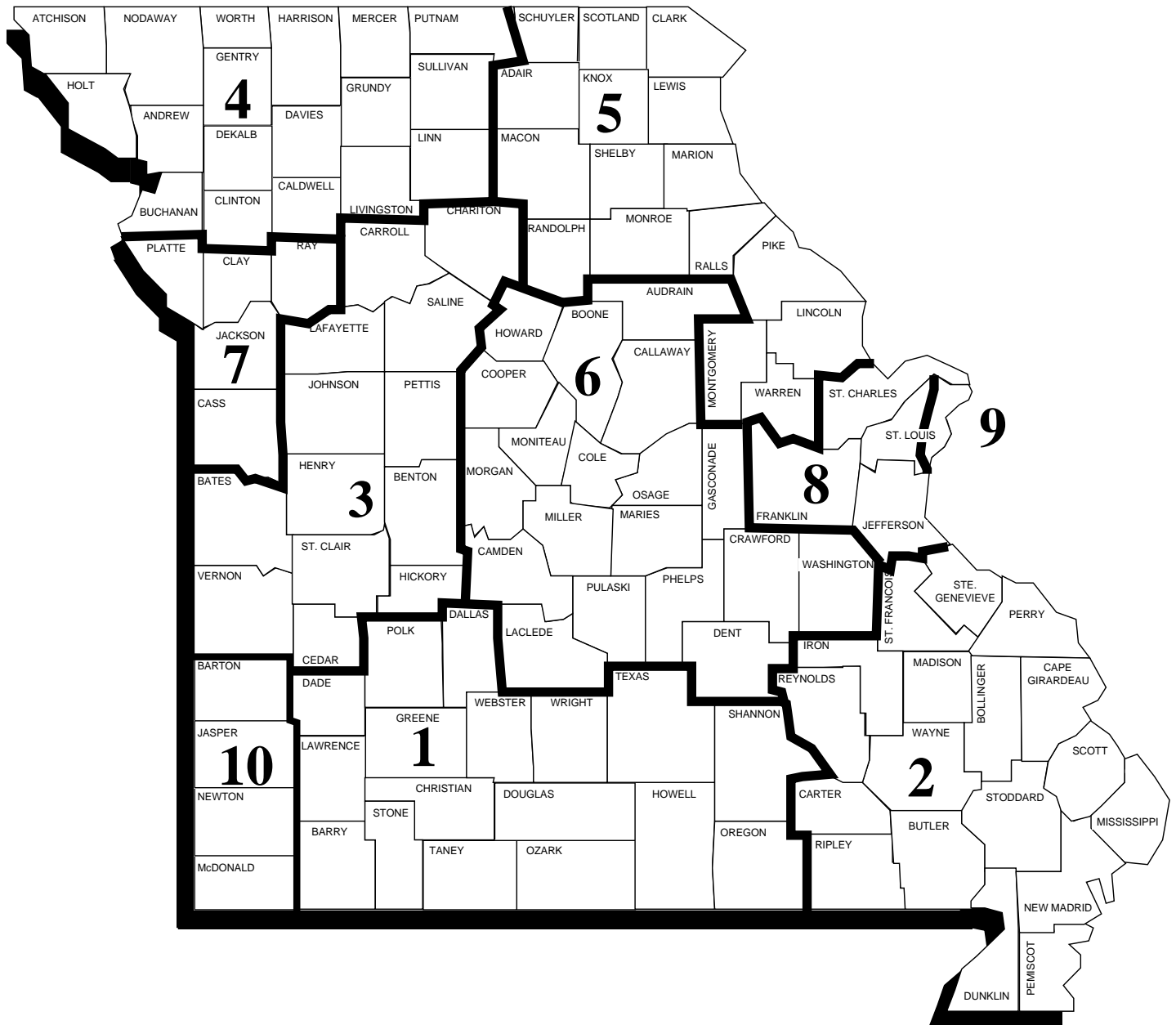


Note: Data obtained from Table 5, Monthly Management Report, DSS Research & Evaluation. Numbers include non-Division of Aging clients as well as Division of Aging clients.

APPENDIX

Missouri Division of Aging

Home & Community Services Regions



- | | | | |
|---|---------------|----|-------------------|
| 1 | South Central | 6 | Central |
| 2 | Southeast | 7 | Metro Kansas City |
| 3 | West Central | 8 | Metro St. Louis |
| 4 | Northwest | 9 | St. Louis City |
| 5 | Northeast | 10 | Southwest |

Regions 1 & 10

Division of Aging
149 Park Central Square
Springfield, MO 65806
(417) 895-6456

Region 2

Division of Aging
130 S. Frederick
P.O. Box 1590
Cape Girardeau, MO 63702
(573) 290-5211

Regions 3 & 7

Division of Aging
Suite 405, State Office Bldg.
615 East 13th St.
Kansas City, MO 64106
(816) 889-3100

Region 4

Division of Aging
525 Jules St., Room 319
St. Joseph, MO 64501
(816) 387-2100

Regions 5 & 6

Division of Aging
Parkade Center #217
Columbia, MO 65203
(573) 882-9474

Regions 8 & 9

Division of Aging
Wainwright Bldg.
111 N. 7th St., 4th Floor
St. Louis, MO 63101
(314) 340-7300

Referrals by County for Fiscal Year 1997

County		Medicaid Eligibles*		% 60+ in NF**	Referrals Received	Screened by CRU***	% of Referrals	Screened by Field Staff	% of Referrals
18+	% 60+								
REGION 1	BARRY	1,668	41.4%	4.7%	126	22	17.5%	104	82.5%
	CHRISTIAN	1,452	38.7%	5.9%	139	10	7.2%	129	92.8%
	DADE	456	52.2%	9.6%	50	6	12.0%	44	88.0%
	DALLAS	829	44.1%	3.8%	61	4	6.6%	57	93.4%
	DOUGLAS	922	47.0%	3.7%	36	1	2.8%	35	97.2%
	GREENE	9,094	34.1%	5.5%	1,015	224	22.1%	791	77.9%
	HOWELL	2,699	45.2%	6.6%	292	27	9.2%	265	90.8%
	LAWRENCE	1,597	42.9%	4.6%	165	68	41.2%	97	58.8%
	OREGON	952	48.7%	4.1%	64	4	6.3%	60	93.8%
	OZARK	770	44.9%	3.7%	40	4	10.0%	36	90.0%
	POLK	1,254	45.3%	6.0%	125	24	19.2%	101	80.8%
	SHANNON	771	42.9%	3.3%	47	2	4.3%	45	95.7%
	STONE	1,053	37.8%	2.7%	66	8	12.1%	58	87.9%
	TANEY	1,192	41.5%	3.2%	114	12	10.5%	102	89.5%
	TEXAS	1,638	41.0%	3.9%	90	17	18.9%	73	81.1%
	WEBSTER	1,241	45.2%	4.4%	95	4	4.2%	91	95.8%
	WRIGHT	1,485	45.9%	4.2%	77	8	10.4%	69	89.6%
* REGION 1 TOTAL *		29,073	40.6%	4.9%	2,602	445	17.1%	2,157	82.9%
REGION 2	BOLLINGER	702	45.7%	3.7%	65	0	0.0%	65	100.0%
	BUTLER	3,728	42.0%	5.1%	332	62	18.7%	270	81.3%
	CAPE GIRARDEAU	2,654	39.3%	6.1%	315	83	26.3%	232	73.7%
	CARTER	642	42.7%	3.5%	43	1	2.3%	42	97.7%
	DUNKLIN	4,488	44.9%	6.6%	279	10	3.6%	269	96.4%
	IRON	1,052	43.5%	12.8%	97	7	7.2%	90	92.8%
	MADISON	938	46.1%	5.3%	86	28	32.6%	58	67.4%
	MISSISSIPPI	1,785	43.2%	7.0%	115	4	3.5%	111	96.5%
	NEW MADRID	2,318	51.6%	6.4%	166	9	5.4%	157	94.6%
	PEMISCOT	3,202	42.6%	3.7%	224	25	11.2%	199	88.8%
	PERRY	741	47.9%	8.0%	46	9	19.6%	37	80.4%
	REYNOLDS	636	39.0%	4.0%	37	1	2.7%	36	97.3%
	RIPLEY	1,587	42.2%	3.7%	55	1	1.8%	54	98.2%
	ST FRANCOIS	3,690	32.6%	5.5%	324	40	12.3%	284	87.7%
	STE GENEVIEVE	637	37.0%	5.3%	59	15	25.4%	44	74.6%
	SCOTT	3,099	40.3%	5.0%	245	34	13.9%	211	86.1%
	STODDARD	2,324	50.0%	5.1%	237	24	10.1%	213	89.9%
	WAYNE	1,415	41.7%	3.7%	81	3	3.7%	78	96.3%
* REGION 2 TOTAL *		35,638	42.5%	5.6%	2,806	356	12.7%	2,450	87.3%
REGION 3	BATES	866	44.9%	6.1%	66	10	15.2%	56	84.8%
	BENTON	985	40.7%	4.2%	87	7	8.0%	80	92.0%
	CARROLL	569	43.8%	3.7%	49	7	14.3%	42	85.7%
	CEDAR	865	47.7%	6.5%	82	8	9.8%	74	90.2%
	CHARITON	461	62.0%	5.2%	56	7	12.5%	49	87.5%
	HENRY	1,288	37.8%	5.2%	136	20	14.7%	116	85.3%
	HICKORY	608	43.9%	3.5%	87	1	1.1%	86	98.9%
	JOHNSON	1,359	32.2%	5.7%	143	5	3.5%	138	96.5%
	LAFAYETTE	1,322	35.1%	4.6%	131	19	14.5%	112	85.5%
	PETTIS	1,890	41.1%	2.2%	263	46	17.5%	217	82.5%
	ST CLAIR	638	47.3%	6.4%	70	18	25.7%	52	74.3%
	SALINE	1,519	39.0%	5.7%	159	17	10.7%	142	89.3%
	VERNON	1,307	38.9%	4.8%	115	20	17.4%	95	82.6%
* REGION 3 TOTAL *		13,677	40.7%	4.8%	1,444	185	12.8%	1,259	87.2%
REGION 4	ANDREW	553	50.5%	8.1%	65	12	18.5%	53	81.5%
	ATCHISON	289	62.3%	7.7%	36	6	16.7%	30	83.3%
	BUCHANAN	4,649	31.4%	5.8%	384	58	15.1%	326	84.9%
	CALDWELL	419	45.1%	8.0%	32	3	9.4%	29	90.6%
	CLINTON	576	40.5%	8.8%	72	18	25.0%	54	75.0%
	DAVISS	344	47.4%	5.0%	28	3	10.7%	25	89.3%
	DE KALB	464	53.4%	10.4%	74	6	8.1%	68	91.9%
	GENTRY	398	57.3%	10.0%	47	4	8.5%	43	91.5%
	GRUNDY	669	50.1%	8.0%	62	6	9.7%	56	90.3%
	HARRISON	496	51.8%	6.9%	47	7	14.9%	40	85.1%
	HOLT	272	57.0%	6.6%	35	2	5.7%	33	94.3%
	LINN	759	55.5%	8.5%	56	5	8.9%	51	91.1%
	LIVINGSTON	804	48.8%	9.0%	84	20	23.8%	64	76.2%
	MERCER	210	60.5%	3.0%	18	1	5.6%	17	94.4%

Referrals by County for Fiscal Year 1997

County	Medicaid Eligibles*		% 60+ in NF**	Referrals Received	Screened by CRU***	% of Referrals	Screened by Field Staff	% of Referrals
	18+	% 60+						
NODAWAY	684	47.5%	5.6%	71	11	15.5%	60	84.5%
PUTNAM	320	50.0%	2.4%	27	7	25.9%	20	74.1%
SULLIVAN	540	53.7%	8.7%	43	4	9.3%	39	90.7%
WORTH	140	52.1%	10.1%	11	0	0.0%	11	100.0%
* REGION 4 TOTAL *	12,586	43.8%	7.1%	1,192	173	14.5%	1,019	85.5%
REGION 5 ADAIR	1,075	41.1%	8.4%	130	25	19.2%	105	80.8%
CLARK	406	48.5%	5.4%	37	4	10.8%	33	89.2%
KNOX	261	52.1%	5.2%	18	4	22.2%	14	77.8%
LEWIS	510	53.5%	10.3%	70	18	25.7%	52	74.3%
LINCOLN	1,212	35.9%	5.1%	83	14	16.9%	69	83.1%
MACON	741	51.4%	7.2%	64	9	14.1%	55	85.9%
MARION	1,748	41.2%	7.4%	185	43	23.2%	142	76.8%
MONROE	383	53.8%	7.2%	44	2	4.5%	42	95.5%
MONTGOMERY	615	52.7%	8.7%	57	17	29.8%	40	70.2%
PIKE	887	49.4%	7.2%	59	6	10.2%	53	89.8%
RALLS	381	41.5%	3.0%	32	1	3.1%	31	96.9%
RANDOLPH	1,377	41.9%	6.5%	101	13	12.9%	88	87.1%
SCHUYLER	283	52.3%	5.0%	17	5	29.4%	12	70.6%
SCOTLAND	309	62.1%	8.7%	22	2	9.1%	20	90.9%
SHELBY	372	53.8%	9.2%	41	7	17.1%	34	82.9%
WARREN	655	36.3%	1.8%	13	2	15.4%	11	84.6%
* REGION 5 TOTAL *	11,215	45.2%	6.7%	973	172	17.7%	801	82.3%
REGION 6 AUDRAIN	1,070	39.4%	7.3%	85	17	20.0%	68	80.0%
BOONE	3,839	25.7%	7.2%	400	107	26.8%	293	73.3%
CALLAWAY	1,347	33.1%	5.1%	67	2	3.0%	65	97.0%
CAMDEN	1,170	39.5%	2.3%	103	26	25.2%	77	74.8%
COLE	1,850	33.4%	7.7%	258	44	17.1%	214	82.9%
COOPER	625	48.8%	5.0%	67	12	17.9%	55	82.1%
CRAWFORD	1,264	37.6%	4.8%	138	19	13.8%	119	86.2%
DENT	1,072	42.1%	4.5%	80	10	12.5%	70	87.5%
GASCONADE	553	56.6%	6.2%	63	18	28.6%	45	71.4%
HOWARD	445	52.8%	4.1%	54	2	3.7%	52	96.3%
LACLEDE	1,684	41.0%	3.1%	138	8	5.8%	130	94.2%
MARIES	461	44.9%	4.8%	33	3	9.1%	30	90.9%
MILLER	1,180	41.9%	4.3%	47	1	2.1%	46	97.9%
MONITEAU	424	59.2%	5.9%	73	5	6.8%	68	93.2%
MORGAN	970	43.8%	3.7%	120	12	10.0%	108	90.0%
OSAGE	334	58.1%	2.4%	51	7	13.7%	44	86.3%
PHELPS	1,860	37.1%	7.2%	124	21	16.9%	103	83.1%
PULASKI	1,412	35.6%	4.5%	124	3	2.4%	121	97.6%
WASHINGTON	2,155	30.9%	3.1%	123	20	16.3%	103	83.7%
* REGION 6 TOTAL *	23,715	37.3%	5.4%	2,148	337	15.7%	1,811	84.3%
REGION 7 CASS	1,861	37.7%	5.3%	199	33	16.6%	166	83.4%
CLAY	3,310	39.0%	4.8%	461	87	18.9%	374	81.1%
JACKSON	30,495	27.2%	4.4%	2,936	559	19.0%	2,377	81.0%
PLATTE	992	41.3%	6.0%	172	33	19.2%	139	80.8%
RAY	713	40.1%	5.6%	90	13	14.4%	77	85.6%
* REGION 7 TOTAL *	37,371	29.4%	4.6%	3,858	725	18.8%	3,133	81.2%
REGION 8 FRANKLIN	2,773	38.7%	4.8%	245	60	24.5%	185	75.5%
JEFFERSON	5,274	31.8%	5.8%	525	39	7.4%	486	92.6%
ST CHARLES	4,132	31.0%	5.5%	360	80	22.2%	280	77.8%
ST LOUIS COUNTY	27,410	32.7%	4.4%	2,758	653	23.7%	2,105	76.3%
* REGION 8 TOTAL *	39,589	32.8%	4.6%	3,888	832	21.4%	3,056	78.6%
REGION 9 ST LOUIS CITY	40,909	23.8%	4.1%	2,089	357	17.1%	1,732	82.9%
REGION 10 BARTON	627	42.1%	3.4%	84	5	6.0%	79	94.0%
JASPER	5,496	36.6%	3.3%	383	32	8.4%	351	91.6%
MCDONALD	1,327	35.5%	3.2%	66	5	7.6%	61	92.4%
NEWTON	2,068	46.9%	4.5%	219	25	11.4%	194	88.6%
* REGION 10 TOTAL *	9,518	39.1%	3.6%	752	67	8.9%	685	91.1%
STATE TOTAL	253,291	35.3%	5.0%	21,753	**** 3,650	16.8%	18,103	83.2%

* Medicaid eligibles based on the average monthly number of eligible individuals, ages 18 or older, issued Medicaid cards during FY 1997.

** % 60+ in a Nursing Facility (NF) based on 1990 Census data.

*** Division of Aging's Central Registry Unit (CRU) receives MCO referrals and screens those referrals of persons in immediate need of nursing facility care.

**** Referrals may include more than one referral per person. County and region were missing for one referral.

Referral Outcomes by County for Fiscal Year 1997

County	Total Referrals		Home-Based		RCF		Nursing Facility		NF-Short Term		No Services/Other	
	#	%	#	%	#	%	#	%	#	%	#	%
REGION 1												
BARRY	126		13	10.3%	10	7.9%	75	59.5%	17	13.5%	11	8.7%
CHRISTIAN	139		9	6.5%	42	30.2%	60	43.2%	16	11.5%	12	8.6%
DADE	50		16	32.0%	0	0.0%	25	50.0%	5	10.0%	4	8.0%
DALLAS	61		13	21.3%	3	4.9%	29	47.5%	10	16.4%	6	9.8%
DOUGLAS	36		8	22.2%	6	16.7%	9	25.0%	11	30.6%	2	5.6%
GREENE	1,015		121	11.9%	122	12.0%	589	58.0%	91	9.0%	92	9.1%
HOWELL	292		100	34.2%	3	1.0%	123	42.1%	47	16.1%	19	6.5%
LAWRENCE	165		16	9.7%	14	8.5%	120	72.7%	7	4.2%	8	4.8%
OREGON	64		23	35.9%	0	0.0%	22	34.4%	17	26.6%	2	3.1%
OZARK	40		9	22.5%	0	0.0%	13	32.5%	14	35.0%	4	10.0%
POLK	125		22	17.6%	19	15.2%	61	48.8%	16	12.8%	7	5.6%
SHANNON	47		20	42.6%	4	8.5%	15	31.9%	7	14.9%	1	2.1%
STONE	66		2	3.0%	10	15.2%	43	65.2%	5	7.6%	6	9.1%
TANEY	114		4	3.5%	20	17.5%	71	62.3%	5	4.4%	14	12.3%
TEXAS	90		8	8.9%	5	5.6%	60	66.7%	13	14.4%	4	4.4%
WEBSTER	95		18	18.9%	10	10.5%	38	40.0%	25	26.3%	4	4.2%
WRIGHT	77		9	11.7%	5	6.5%	48	62.3%	12	15.6%	3	3.9%
* REGION 1 TOTAL *	2,602		411	15.8%	273	10.5%	1,401	53.8%	318	12.2%	199	7.6%
REGION 2												
BOLLINGER	65		16	24.6%	13	20.0%	10	15.4%	17	26.2%	9	13.8%
BUTLER	332		84	25.3%	51	15.4%	159	47.9%	24	7.2%	14	4.2%
CAPE GIRARDEAU	315		27	8.6%	48	15.2%	176	55.9%	34	10.8%	30	9.5%
CARTER	43		15	34.9%	10	23.3%	8	18.6%	8	18.6%	2	4.7%
DUNKLIN	279		48	17.2%	18	6.5%	115	41.2%	86	30.8%	12	4.3%
IRON	97		22	22.7%	32	33.0%	30	30.9%	11	11.3%	2	2.1%
MADISON	86		14	16.3%	4	4.7%	55	64.0%	10	11.6%	3	3.5%
MISSISSIPPI	115		45	39.1%	0	0.0%	51	44.3%	16	13.9%	3	2.6%
NEW MADRID	166		75	45.2%	0	0.0%	50	30.1%	37	22.3%	4	2.4%
PEMISCOT	224		72	32.1%	2	0.9%	68	30.4%	72	32.1%	10	4.5%
PERRY	46		4	8.7%	5	10.9%	31	67.4%	5	10.9%	1	2.2%
REYNOLDS	37		18	48.6%	1	2.7%	6	16.2%	11	29.7%	1	2.7%
RIPLEY	55		7	12.7%	9	16.4%	26	47.3%	7	12.7%	6	10.9%
ST FRANCOIS	324		39	12.0%	108	33.3%	110	34.0%	35	10.8%	32	9.9%
STE GENEVIEVE	59		6	10.2%	18	30.5%	31	52.5%	1	1.7%	3	5.1%
SCOTT	245		50	20.4%	26	10.6%	97	39.6%	44	18.0%	28	11.4%
STODDARD	237		74	31.2%	29	12.2%	85	35.9%	39	16.5%	10	4.2%
WAYNE	81		25	30.9%	2	2.5%	26	32.1%	25	30.9%	3	3.7%
* REGION 2 TOTAL *	2,806		641	22.8%	376	13.4%	1,134	40.4%	482	17.2%	173	6.2%
REGION 3												
BATES	66		14	21.2%	2	3.0%	33	50.0%	14	21.2%	3	4.5%
BENTON	87		43	49.4%	2	2.3%	33	37.9%	6	6.9%	3	3.4%
CARROLL	49		0	0.0%	3	6.1%	43	87.8%	1	2.0%	2	4.1%
CEDAR	82		24	29.3%	7	8.5%	37	45.1%	9	11.0%	5	6.1%
CHARITON	56		1	1.8%	1	1.8%	39	69.6%	14	25.0%	1	1.8%
HENRY	136		37	27.2%	14	10.3%	53	39.0%	28	20.6%	4	2.9%
HICKORY	87		34	39.1%	0	0.0%	34	39.1%	14	16.1%	5	5.7%
JOHNSON	143		57	39.9%	20	14.0%	53	37.1%	6	4.2%	7	4.9%
LAFAYETTE	131		31	23.7%	14	10.7%	74	56.5%	7	5.3%	5	3.8%
PETTIS	263		77	29.3%	45	17.1%	113	43.0%	16	6.1%	12	4.6%
ST CLAIR	70		23	32.9%	1	1.4%	38	54.3%	6	8.6%	2	2.9%
SALINE	159		61	38.4%	28	17.6%	57	35.8%	6	3.8%	7	4.4%
VERNON	115		17	14.8%	20	17.4%	62	53.9%	14	12.2%	2	1.7%
* REGION 3 TOTAL *	1,444		419	29.0%	157	10.9%	669	46.3%	141	9.8%	58	4.0%
RE3GION 4												
ANDREW	65		21	32.3%	3	4.6%	33	50.8%	4	6.2%	4	6.2%
ATCHISON	36		17	47.2%	0	0.0%	13	36.1%	6	16.7%	0	0.0%
BUCHANAN	384		32	8.3%	82	21.4%	176	45.8%	52	13.5%	42	10.9%
CALDWELL	32		6	18.8%	1	3.1%	20	62.5%	4	12.5%	1	3.1%
CLINTON	72		6	8.3%	1	1.4%	52	72.2%	7	9.7%	6	8.3%
DAVISS	28		9	32.1%	1	3.6%	9	32.1%	7	25.0%	2	7.1%
DE KALB	74		6	8.1%	21	28.4%	35	47.3%	10	13.5%	2	2.7%
GENTRY	47		4	8.5%	5	10.6%	23	48.9%	11	23.4%	4	8.5%
GRUNDY	62		8	12.9%	4	6.5%	30	48.4%	15	24.2%	5	8.1%
HARRISON	47		2	4.3%	2	4.3%	28	59.6%	15	31.9%	0	0.0%
HOLT	35		11	31.4%	1	2.9%	16	45.7%	7	20.0%	0	0.0%
LINN	56		3	5.4%	5	8.9%	17	30.4%	25	44.6%	6	10.7%
LIVINGSTON	84		1	1.2%	15	17.9%	46	54.8%	16	19.0%	6	7.1%
MERCER	18		2	11.1%	4	22.2%	4	22.2%	3	16.7%	5	27.8%

Referral Outcomes by County for Fiscal Year 1997

	County	Total	Home-Based		RCF		Nursing Facility		NF-Short Term		No Services/Other	
		Referrals	#	%	#	%	#	%	#	%	#	%
REGION 5	NODAWAY	71	9	12.7%	8	11.3%	24	33.8%	25	35.2%	5	7.0%
	PUTNAM	27	5	18.5%	3	11.1%	10	37.0%	7	25.9%	2	7.4%
	SULLIVAN	43	7	16.3%	9	20.9%	9	20.9%	16	37.2%	2	4.7%
	WORTH	11	1	9.1%	0	0.0%	5	45.5%	3	27.3%	2	18.2%
	* REGION 4 TOTAL *	1,192	150	12.6%	165	13.8%	550	46.1%	233	19.5%	94	7.9%
	ADAIR	130	47	36.2%	11	8.5%	52	40.0%	14	10.8%	6	4.6%
	CLARK	37	14	37.8%	3	8.1%	18	48.6%	2	5.4%	0	0.0%
	KNOX	18	3	16.7%	2	11.1%	7	38.9%	6	33.3%	0	0.0%
	LEWIS	70	7	10.0%	2	2.9%	51	72.9%	9	12.9%	1	1.4%
	LINCOLN	83	4	4.8%	12	14.5%	54	65.1%	6	7.2%	7	8.4%
REGION 6	MACON	64	6	9.4%	0	0.0%	44	68.8%	13	20.3%	1	1.6%
	MARION	185	6	3.2%	20	10.8%	116	62.7%	39	21.1%	4	2.2%
	MONROE	44	10	22.7%	8	18.2%	13	29.5%	10	22.7%	3	6.8%
	MONTGOMERY	57	3	5.3%	3	5.3%	48	84.2%	2	3.5%	1	1.8%
	PIKE	59	8	13.6%	3	5.1%	36	61.0%	11	18.6%	1	1.7%
	RALLS	32	3	9.4%	3	9.4%	21	65.6%	4	12.5%	1	3.1%
	RANDOLPH	101	10	9.9%	15	14.9%	55	54.5%	16	15.8%	5	5.0%
	SCHUYLER	17	5	29.4%	0	0.0%	6	35.3%	5	29.4%	1	5.9%
	SCOTLAND	22	3	13.6%	5	22.7%	5	22.7%	7	31.8%	2	9.1%
	SHELBY	41	11	26.8%	5	12.2%	17	41.5%	7	17.1%	1	2.4%
	WARREN	13	1	7.7%	0	0.0%	12	92.3%	0	0.0%	0	0.0%
	* REGION 5 TOTAL *	973	141	14.5%	92	9.5%	555	57.0%	151	15.5%	34	3.5%
REGION 6	AUDRAIN	85	14	16.5%	9	10.6%	52	61.2%	8	9.4%	2	2.4%
	BOONE	400	26	6.5%	54	13.5%	233	58.3%	53	13.3%	34	8.5%
	CALLAWAY	67	4	6.0%	18	26.9%	36	53.7%	5	7.5%	4	6.0%
	CAMDEN	103	35	34.0%	1	1.0%	47	45.6%	14	13.6%	6	5.8%
	COLE	258	24	9.3%	53	20.5%	133	51.6%	36	14.0%	12	4.7%
	COOPER	67	8	11.9%	16	23.9%	36	53.7%	5	7.5%	2	3.0%
	CRAWFORD	138	11	8.0%	25	18.1%	89	64.5%	6	4.3%	7	5.1%
	DENT	80	17	21.3%	11	13.8%	38	47.5%	9	11.3%	5	6.3%
	GASCONADE	63	9	14.3%	3	4.8%	41	65.1%	4	6.3%	6	9.5%
	HOWARD	54	14	25.9%	15	27.8%	17	31.5%	4	7.4%	4	7.4%
REGION 7	LACLEDE	138	27	19.6%	33	23.9%	67	48.6%	7	5.1%	4	2.9%
	MARIES	33	2	6.1%	1	3.0%	21	63.6%	7	21.2%	2	6.1%
	MILLER	47	6	12.8%	12	25.5%	19	40.4%	4	8.5%	6	12.8%
	MONITEAU	73	39	53.4%	1	1.4%	26	35.6%	6	8.2%	1	1.4%
	MORGAN	120	40	33.3%	11	9.2%	51	42.5%	15	12.5%	3	2.5%
	OSAGE	51	12	23.5%	7	13.7%	24	47.1%	5	9.8%	3	5.9%
	PHELPS	124	13	10.5%	17	13.7%	77	62.1%	11	8.9%	6	4.8%
	PULASKI	124	55	44.4%	7	5.6%	46	37.1%	11	8.9%	5	4.0%
	WASHINGTON	123	18	14.6%	17	13.8%	58	47.2%	20	16.3%	10	8.1%
	* REGION 6 TOTAL *	2,148	374	17.4%	311	14.5%	1,111	51.7%	230	10.7%	122	5.7%
REGION 7	CASS	199	8	4.0%	45	22.6%	126	63.3%	14	7.0%	6	3.0%
	CLAY	461	21	4.6%	57	12.4%	302	65.5%	27	5.9%	54	11.7%
	JACKSON	2,936	647	22.0%	428	14.6%	1,440	49.0%	77	2.6%	344	11.7%
	PLATTE	172	6	3.5%	16	9.3%	138	80.2%	6	3.5%	6	3.5%
	RAY	90	48	53.3%	2	2.2%	34	37.8%	2	2.2%	4	4.4%
	* REGION 7 TOTAL *	3,858	730	18.9%	548	14.2%	2,040	52.9%	126	3.3%	414	10.7%
REGION 8	FRANKLIN	245	46	18.8%	10	4.1%	157	64.1%	11	4.5%	21	8.6%
	JEFFERSON	525	62	11.8%	113	21.5%	305	58.1%	15	2.9%	30	5.7%
	ST CHARLES	360	39	10.8%	38	10.6%	244	67.8%	10	2.8%	29	8.1%
	ST LOUIS COUNTY	2,758	404	14.6%	159	5.8%	1,831	66.4%	78	2.8%	286	10.4%
	* REGION 8 TOTAL *	3,888	551	14.2%	320	8.2%	2,537	65.3%	114	2.9%	366	9.4%
REGION 9	ST LOUIS CITY	2,089	599	28.6%	209	10.0%	998	47.8%	73	3.5%	210	10.0%
REGION 10	BARTON	84	2	2.4%	36	42.9%	28	33.3%	11	13.1%	7	8.3%
	JASPER	383	18	4.7%	80	20.9%	176	46.0%	66	17.2%	43	11.2%
	MCDONALD	66	2	3.0%	9	13.6%	41	62.1%	10	15.2%	4	6.1%
	NEWTON	219	5	2.3%	18	8.2%	157	71.7%	26	11.9%	13	5.9%
	* REGION 10 TOTAL *	752	27	3.6%	143	19.0%	402	53.5%	113	15.0%	67	8.9%
STATE TOTAL		21,753 *	4,043	18.6%	2,594	11.9%	11,397	52.4%	1,981	9.1%	1,738 *	8.0%

* County and region were missing for one referral.

Note: No Services/Other includes not receiving a service funded by MCO appropriations, returning to the community on their own resources, improved to where no care was needed, died before a long-term care decision could be made, or there was insufficient data to determine an outcome.

Referral Outcomes by Region and Fiscal Year

	FY 1995		FY 1996		FY 1997	
	#	% of Referrals	#	% of Referrals	#	% of Referrals
Home/Community-Based Outcomes						
State Total	1,807	10.0%	2,582	13.2%	4,043	18.6%
Region 1 - South Central	166	7.4%	227	9.5%	411	15.8%
Region 2 - Southeast	640	23.0%	725	26.0%	641	22.8%
Region 3 - West Central	132	13.1%	329	24.3%	419	29.0%
Region 4 - Northwest	76	6.9%	76	6.9%	150	12.6%
Region 5 - Northeast	89	9.3%	142	14.2%	141	14.5%
Region 6 - Central	192	11.9%	326	16.6%	374	17.4%
Region 7 - Metro Kansas City	136	4.8%	307	10.0%	730	18.9%
Region 8 - Metro St. Louis	197	6.2%	243	6.7%	551	14.2%
Region 9 - St. Louis City	160	9.3%	185	11.1%	599	28.7%
Region 10 - Southwest	19	2.7%	22	3.3%	27	3.6%
RCF Outcomes						
State Total	2,223	12.2%	1,989	10.1%	2,594	11.9%
Region 1 - South Central	318	14.1%	264	11.1%	273	10.5%
Region 2 - Southeast	353	12.7%	294	10.5%	376	13.4%
Region 3 - West Central	113	11.2%	135	10.0%	157	10.9%
Region 4 - Northwest	157	14.2%	163	14.7%	165	13.8%
Region 5 - Northeast	152	15.9%	100	10.0%	92	9.5%
Region 6 - Central	176	10.9%	199	10.1%	311	14.5%
Region 7 - Metro Kansas City	302	10.6%	264	8.6%	548	14.2%
Region 8 - Metro St. Louis	292	9.2%	293	8.1%	320	8.2%
Region 9 - St. Louis City	217	12.6%	161	9.7%	209	10.0%
Region 10 - Southwest	143	20.3%	116	17.4%	143	19.0%
Nursing Facility Outcomes						
State Total	11,397	62.8%	12,088	61.7%	11,397	52.4%
Region 1 - South Central	1,374	61.1%	1,470	61.8%	1,401	53.8%
Region 2 - Southeast	1,268	45.6%	1,187	42.6%	1,134	40.4%
Region 3 - West Central	610	60.4%	689	50.8%	669	46.3%
Region 4 - Northwest	620	56.3%	605	54.7%	550	46.1%
Region 5 - Northeast	570	59.6%	553	55.5%	555	57.0%
Region 6 - Central	1,026	63.8%	1,153	58.6%	1,111	51.7%
Region 7 - Metro Kansas City	2,069	72.6%	2,210	71.7%	2,040	52.9%
Region 8 - Metro St. Louis	2,348	74.0%	2,731	75.8%	2,537	65.3%
Region 9 - St. Louis City	1,105	64.3%	1,075	64.8%	998	47.8%
Region 10 - Southwest	404	57.4%	415	62.4%	402	53.5%

Referral Outcomes by Region and Fiscal Year

	FY 1995		FY 1996		FY 1997	
	#	% of Referrals	#	% of Referrals	#	% of Referrals
<i>Nursing Facility - Short-Term Outcomes</i>						
State Total	1,377	7.6%	1,715	8.7%	1,981	9.1%
Region 1 - South Central	242	10.8%	283	11.9%	318	12.2%
Region 2 - Southeast	371	13.3%	436	15.6%	482	17.2%
Region 3 - West Central	103	10.2%	142	10.5%	141	9.8%
Region 4 - Northwest	180	16.3%	209	18.9%	233	19.5%
Region 5 - Northeast	99	10.4%	171	17.2%	151	15.5%
Region 6 - Central	134	8.3%	187	9.5%	230	10.7%
Region 7 - Metro Kansas City	97	3.4%	96	3.1%	126	3.3%
Region 8 - Metro St. Louis	48	1.5%	71	2.0%	114	2.9%
Region 9 - St. Louis City	32	1.9%	43	2.6%	73	3.5%
Region 10 - Southwest	71	10.1%	77	11.6%	113	15.0%
<i>No Services/Other Outcomes *</i>						
State Total	1,349	7.4%	1,229	6.3%	1,738	8.0%
Region 1 - South Central	149	6.6%	136	5.7%	199	7.6%
Region 2 - Southeast	150	5.4%	147	5.3%	173	6.2%
Region 3 - West Central	52	5.1%	61	4.5%	58	4.0%
Region 4 - Northwest	69	6.3%	54	4.9%	94	7.9%
Region 5 - Northeast	46	4.8%	31	3.1%	34	3.5%
Region 6 - Central	79	4.9%	101	5.1%	122	5.7%
Region 7 - Metro Kansas City	244	8.6%	206	6.7%	414	10.7%
Region 8 - Metro St. Louis	288	9.1%	263	7.3%	366	9.4%
Region 9 - St. Louis City	205	11.9%	195	11.8%	210	10.0%
Region 10 - Southwest	67	9.5%	35	5.3%	67	8.9%

* **No Services/Other** includes not receiving a service funded by MCO appropriations, returning to the community on their own resources, improved to where no care was needed, died before a long-term care decision could be made, or there was insufficient data to determine an outcome. Region was missing for one referral in FY 1997; therefore regional totals will not add to state total.

Description of Home/Community Services

Homemaker Care

General housekeeping tasks provided by trained homemakers to assist with routine household activities.

Basic Personal Care

Assistance with activities of daily living such as grooming, bathing, dressing and eating.

Advanced Personal Care

Assistance with daily living for persons with altered body functions requiring more medically related assistance.

Respite Care

Companion and oversight services which provide temporary relief for the regular caregiver of a dependent adult.

Adult Day Care

Organized programs consisting of therapeutic, rehabilitative and social activities provided outside the home to persons with functional impairments.

RN Visits

Maintenance, supervisory or preventive services provided by a registered nurse or licensed practical nurse.

RCF Services

Personal care services, advanced personal care services and/or RN visits provided to residents of residential care facilities.

Maximum Reimbursement Unit Rates for Home/Community Services

<i>Homemaker and Basic Personal Care</i>					
Unit: 1 hour		Unit Rate:	July 1, 1992	\$9.11	
			July 1, 1993	\$9.61	
			July 1, 1994	\$9.86	
			July 1, 1995	\$10.36	
			July 1, 1996	\$10.86	
			November 1, 1996	\$11.46	
<i>Advanced Personal Care</i>					
Unit: 1 hour		Unit Rate:	July 1, 1992	\$11.61	
			July 1, 1993	\$12.11	
			July 1, 1994	\$14.61	
			July 1, 1996	\$14.90	
			November 1, 1996	\$15.50	
<i>Respite, in-home 12-hour</i>					
Unit: 9-12 hours		Unit Rate:	July 1, 1992	\$40.00	
<i>Respite, in-home 1 hour</i>					
Unit: 1 hour		Unit Rate:	July 1, 1992	\$6.11	
			July 1, 1993	\$7.11	
			July 1, 1994	\$7.36	
			July 1, 1996	\$9.00	
			November 1, 1996	\$9.60	
<i>Advanced Respite, in-home 1 hour</i>					
Unit: 1 hour		Unit Rate:	July 1, 1996	\$12.00	
			November 1, 1996	\$12.60	
<i>Adult day care (1 day)</i>					
Unit: 1 day		Unit Rate:	July 1, 1992	\$32.00	
			July 1, 1994	\$33.50	
			July 1, 1996	\$40.00	
			November 1, 1996	\$41.50	
<i>RN Visits</i>					
Unit: 1 visit		Unit Rate:	July 1, 1990	\$25.00	
			July 1, 1996	\$35.00	
			November 1, 1996	\$35.60	
<i>RCF Services</i>					
			<i>Personal Care</i>	<i>Advanced Personal Care</i>	<i>RN Visits</i>
Unit: 1 hour	Unit Rate:	October 1, 1993	\$9.61	\$12.11	\$25.00
		July 1, 1996	\$10.07	\$12.11	\$25.00
		November 1, 1996	\$10.67	\$12.71	\$25.60